

FEB 02 2006

CERTIFICATE OF FACSIMILE TRANSMISSION
UNDER 37 CFR §1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted on the date indicated below via facsimile to the United States Patent and Trademark Office, facsimile number (571) 273-8300.

Date 02-02-06

Marianne Boland
Marianne Boland

In Re Application of:

Kent, et al.

Confirmation No.: 1981

Group Art Unit: 2643

Serial No.: 10/755,491

Examiner: Ramakrishnaiah,

Melur

Filed: January 12, 2004


Docket No. 190250-1280

For: INTELLIGENT INTERACTIVE CALL HANDLING

Amendment Transmittal Letter
Response to Notice of Non-Compliant Amendment

Total Pages Transmitted (including cover sheet) – 19

FEB 02 2006

AMENDMENT TRANSMITTAL LETTER (LARGE)				Docket No. 190250-1280	
Applicant(s): Kent, et al.					
Serial No. 10/755,491	Filing Date January 12, 2004	Examiner Ramakrishnaiah, M.	Confirmation No. 1981	Group Art Unit 2643	
Invention: INTELLIGENT INTERACTIVE CALL HANDLING					
<p>Commissioner for Patents Mail Stop Amendment P.O. Box 1450 Alexandria VA 22313-1450</p> <p>Transmitted herewith is a Response to Notice of Non-Compliant Amendment in the above-identified application. The fee has been calculated and is transmitted as shown below</p>					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	32 -	32 =	0	X \$50.00	\$0
INDEP. CLAIMS	4 -	4 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0
<p><input checked="" type="checkbox"/> No additional fee is required.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.</p> <p><input type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.</p>					
 Charles W. Griggers, Reg. No. 47,283			<u>2-2-06</u> Date		

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In Re Application of:

Kent, et al.

Serial No.: 10/755,491

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Examiner: Ramakrishnaiah, Mehur

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For: INTELLIGENT INTERACTIVE CALL HANDLING

RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Notice of Non-Compliant Amendment dated January 5, 2006, Applicants hereby submit an updated claim listing, wherein claim 6 is amended to show the proper status identifier. Further, in response to the Office action of September 30, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper; and

Remarks/Arguments begin on page 10 of this paper.

AUTHORIZATION TO DEBIT ACCOUNT

It is believed that no extensions of time or fees for net addition of claims are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 20-0778.

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